## **Chris Aquino**

**From:** WMATC E-Filing <administrator@wmatc.gov>

**Sent:** Saturday, January 30, 2016 9:15 AM **To:** Constantine Kolouas; Chris Aquino

**Subject:** 2016 Annual Report - WMATC No: 2042, Carrier Name: Sigma Corporation

# **Washington Metropolitan Area Transit Commission**

2016 Carrier Annual Report Form

### **FILING INFORMATION:**

- Each carrier holding a WMATC certificate of authority on January 1, 2016, must file a complete 2016 annual report and pay a \$175 annual fee on or before **February 1, 2016.** To be timely, the report and fee must be received at WMATC's office by 4:30 p.m. (or submitted online by 11:59 p.m.) on that date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (\*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a \$150 late fee. Each carrier that fails to pay the \$175 annual fee on time will be assessed a separate \$150 late fee.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 1, 2016.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

Read the accompanying instructions carefully before completing this form.

#### 1. ANNUAL REPORT OF:

**WMATC No.:** 2042

Name of Carrier (as shown on certificate of authority): Sigma Corporation

**Trade Name:** 

**Principal Place of Business** 

Street Address: 225 SOUTH WHITING ST

Apt./Suite: 120 City: ALEXANDRIA

State: VA Zip: 22304

**Mailing Address (if different from street address)** 

Street: 6004 Pemberton Lane

**Apt./Suite:** 

City: Hyattsville

**State:** MD **Zip:** 20785

Telephone Number: 2023594576 Other Telephone: 2023594576 Fax Number: E-mail: <a href="mailto:yassirjalal@gmail.com">yassirjalal@gmail.com</a>
2. OTHER PASSENGER CARRIER AUTHORITY (if applicable, list carrier/permit number): USDOT No.: DCTC No.: Virginia DMV passenger carrier No.: Maryland PSC No.: Virginia
3. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries): Name: yassir Mohamed Title: president Telephone Number: 2023594576 Other Telephone: 2023594576 Fax Number: E-mail: yassirjalal@gmail.com
4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS *Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see <a href="https://www.wmatc.gov">www.wmatc.gov</a> .  Name of Registered Agent for Service of Process: Agent Address: Apt./Suite: City: State: Zip: Telephone Number: E-mail:
<b>5. *CHANGES:</b> Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

**6. \*LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** (1) list your vehicles below or (2) upload a complete vehicle list to this form. If you have more than 10 vehicles in your fleet, you must use option 2. Include all required information.

Fleet No.	Year*	Make*	Vehicle VIN*	License Plate*	State*	Seating Cap.*	Wheel Chair
7	2007	Lincoln	1LNHM84W87Y614175	SGMA30	VA	5	No
24	2011	Lincoln	2LNBL8CV3BX753723	SGMA24	VA	5	No
26	2009	Lincoln	2LNHM82V09X621604	SGMA26	VA	5	No
27	2011	Lincoln	2LNBL8EV8BX751978	SGMA27	VA	5	No
28	2011	Lincoln	2LNBL8EV2BX757002	SGMA28	VA	5	No
29	2011	Lincoln	2LNBL8EV4BX764355	SGMA29	VA	5	No
37	2013	Lincoln	1LNHL9DK2DG614762	H526110	VA	5	No
38	2013	Lincoln	1LNHL9DK8DG607878	SGMA38	VA	5	No
21	2007	Toyota	JTDKB20U677578364	SGMAX21	VA	5	No

### 7. \*CERTIFICATION:

I certify that this report, including any attachments, was prepared by me and under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

Name: Yassir Mohamed

**Title:** President **Date:** 01/30/2016

<sup>\*</sup>Filer has chosen vehicle list option (1), vehicles listed above. No vehicle list file was uploaded.